

restless, with frequent efforts to vomit. Two hours and a half afterwards almost incessant vomiting set in, and continued for some two hours, when it was discovered that the child had taken the poison. On my arrival, five hours after the accident, it threw up what the parents supposed to be a worm. This, however, I discovered to be the mucous membrane of the œsophagus entire, which I have preserved in alcohol. It was $4\frac{1}{2}$ inches in length. I ordered a tablespoonful of flaxseed-tea to be given every 15 minutes, which was immediately rejected. Slippery elm was given, with the same result. At 8 o'clock P. M. I gave equal quantities of water and sweet milk, in the same dose, at intervals of 20 minutes. This was retained somewhat longer. At 1 o'clock A. M. it remained from three to five minutes before rejection. 4 o'clock A. M., no urine or feces had been discharged. An injection of flaxseed-tea was administered, and repeated within an hour, without bringing away any fecal matter. An injection of olive oil and molasses, a drachm of each, with four ounces of Castile soap-suds, was then given, by which a copious discharge of fecal matter was procured; a small quantity of urine was also passed, highly coloured, without any trace of blood. 2 o'clock P. M., patient better. Continue milk and water; every third dose flaxseed-tea or slippery elm. 10 o'clock P. M., patient retains drink for 10 to 15 minutes. Third day, 8 A. M., patient improving; same treatment continued; drink every hour; occasionally short naps of sleep obtained; passed a small quantity of urine, still high coloured. After injection, fecal discharges, without any appearance of blood. Drinks retained 15 to 20 minutes. 8 o'clock P. M., patient improving; drinks given alternately with rice-water; retained. Fourth day, 6 o'clock A. M., patient slept more during night; the fever, which has been high from beginning, is abating; emesis not more than once every two hours. 5 P. M., patient vomited but once since last visit; is clear of fever; urine assuming a natural appearance, but small in quantity; an injection was administered, which had the desired effect. From this time convalescence took place rapidly. In a week the patient was entirely recovered."

Extraordinary Obesity.—We find in the *Nashville Journ. of Med. and Surg.*, Aug., 1857, the following particulars respecting Miles Darden, whose size may appear almost fabulous, but the facts seem well vouched for.

"Mr. Darden was born in North Carolina in 1798, and died at his residence in Henderson County, Tennessee, January 23, 1857. He was seven feet six inches high. In 1845 he weighed eight hundred and seventy-one pounds, and at his death a fraction over *one thousand pounds*, and was unquestionably the largest man in the world, and since 'those days' in which there were giants, the largest man the world has produced. Up to 1853 'he was quite active and lively, and laboured,' after which, his fat increasing, he was compelled to stay at home or be hauled about in a two-horse wagon. It required thirteen and a half yards of flax cloth a yard wide to make him a coat. It required sixteen yards of cambric for his shroud, and twenty-four yards of black velvet to cover his coffin."

Exsection of the Head of the Humerus.—This operation was performed in June last by Prof. GEO. C. BLACKMAN, in the case of a lad 5 years of age, admitted into the Commercial Hospital, with caries of the head and upper extremity of the humerus. The wound healed without any untoward symptom, and the lad is now in good health and has a pretty good use of the limb. *Western Lancet*, Aug., 1857.

Gelseminum Sempervirens in Gonorrhœa.—Dr. JOHN DOUGLAS, of Chester District, S. C., states (*Charleston Med. Journ.*, July, 1857), that "about thirty years ago, I was called on, in my office, by a young man who had been suffering several months with improperly treated gonorrhœa. One of my pupils begged me to give the case to him, observing that he could cure the most obstinate case in a few days with the root of yellow jessamine. A small handful of the root was put into a colamon junk bottle of whiskey, and the patient ordered, in a day or two, to take a tablespoonful of this tincture night

and morning. He took but a few doses before he became much alarmed, and called on me, stating that the medicine had destroyed his vision. The symptoms he described correspond precisely with those mentioned by Dr. M. Every symptom of gonorrhœa had disappeared, and the cure was permanent. Since that time I have treated many cases of the same character in a similar manner with uniform and speedy success."

My experience with the medicine is not sufficient to determine whether it is absolutely necessary that the patient should be fully narcotized, but such was the condition in every case which I treated. I have no doubt but a more protracted use in smaller doses would answer the purpose.

Preservation of Vaccine Matter by Solution in Glycerine.—The Chicago correspondent of the *Peninsular Journal of Medicine*, states that Dr. Andrews, of Chicago, has made some experiments in the preservation of vaccine virus by solution in glycerine, using the solution instead of the solid matter for vaccination.

In Dr. Andrews' experiment, the vaccine matter was kept in solution two or three months of warm weather, at the end of which time seven cases were vaccinated with it, without a single failure. The scab broken into three or four pieces is thrown into a little glycerine, and occasionally shaken. It will slowly dissolve without further care. Dr. Johnson has repeated Dr. Andrews' experiments with success.

Woman with four Mammeæ.—An example of this occurred lately in the Charity Hospital. The supplementary nipples were situated about two inches below the others. The patient had had seven children and was accustomed to suckle from three of the nipples. All furnished milk equally well, but the right supplementary nipple was small.—*N. O. Med. News and Hosp. Gazette*, Sept. 1857.

[M. ROBERTS (see No. for Aug., 1828, p. 412), records two cases, a mother and daughter, in which each had three mammeæ. In one the third mamma was in the groin and served to suckle several children.]

Philadelphia Hospital, Blockley.—At a meeting of the Guardians of the Poor, held on the 8th of June last, Dr. James McClintock was elected Chief Resident Physician to this Institution. This appointment has been regarded by the profession of Philadelphia as a gross insult to them, and has been indignantly denounced both by the College of Physicians of Philadelphia and by the Philadelphia County Medical Society.

Immediately after the appointment of Dr. McClintock, all but one of the Resident Physicians of the Blockley Hospital, and all the members of the consulting medical, surgical and obstetrical staff resigned.

Of Dr. McClintock, we are unable to speak from personal acquaintance; but the following episode in his history as it is related by one who claims "*long-time friendship*" with him, may be deemed authentic, and may serve to enlighten the reader as to his career:—

"It is now only three or four years since Dr. James McClintock, of Philadelphia, in an evil hour, consented, for a consideration of some \$5,000, to furnish a series of recipes for 'Family Medicines,' and to allow his name and titles to accompany their announcement, in the usual style of nostrum venders, he and his heirs retaining an interest in the sales. The moneyed parties to this new phase of quackery were understood to be Thos. McElrath, Esq., of the *N. Y. Tribune*, and Wm. E. Burton, Esq., of the theatre, both of whom entered into this speculation with as high hopes as they ever made investments in any other 'fancy stocks;' and by dint of columns of advertisements, and editorial puffs from all the presses known to be in the market for hire, they rivalled Brandreth, Moffet, Jayne, Ayres, and even Hunter! in their advertising patronage to corruptible newspapers.

¹ Dr. D. Meredith Reese.